

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>	1A	1801	10/1
<b>O.I.P.E. CLASSIFIER</b>		70	10/1/00
<b>FORMALITY REVIEW</b>	1005	JC 886	11-06-00
<b>RESPONSE FORMALITY REVIEW</b>	72	SC 947	04/16/01

**INDEX OF CLAIMS**

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 — (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      0 ..... Objected

Claim	Date
Final	
Original	3-22-91
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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